



Express Mailing Label No. EV 382 938 262 US

PATENT APPLICATION
Docket No: 15292.2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of)
Stefan Johansson)
Serial No.: 09/684,057) Art Unit
Filed: October 6, 2000) 2153
Confirmation No.: 1607)
For: DATA TRANSFER)
Examiner: Bradley E. Edelman)

AMENDMENT "A" AND RESPONSE

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Office action of August 5, 2004, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Drawings begin on page 5 of this paper and include three attached replacement sheets.

Amendments to the Claims begin on page 6 of this paper.

Remarks/Arguments begin on page 16 of this paper.

An Appendix including amended drawing figures is attached following page 23 of this paper.

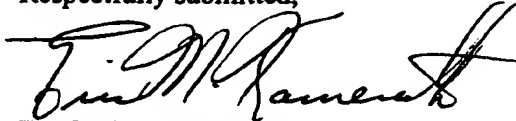
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In view of the foregoing, applicant respectfully requests the Examiner's reconsideration and allowance of claims 1-30 and 35-36 as amended and presented herein.

In the event there remains any impediment to allowance of the claims which could be clarified in a telephone interview, the Examiner is respectfully requested to initiate such an interview with the undersigned.

Dated this 5th day of January 2005.

Respectfully submitted,



ERIC M. KAMERATH

Attorney for Applicant

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EMK:ahm

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

09/084 057

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	01/05/05		
Total	36	Minus 34	= 2
Independent	4	Minus 4	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1, 16, 24 31

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	395.00
x 25	
x 100	
+ 180	
TOTAL	

RATE	FEE
BASIC FEE	790.00
x 50	
x 200	
+ 360	
TOTAL	

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
x 25	
x 100	
+ 180	
TOTAL	

RATE	ADDITIONAL FEE
x 50	100
x 200	
+ 360	
TOTAL	100

RATE	ADDITIONAL FEE
x 25	
x 100	
+ 180	
TOTAL	

RATE	ADDITIONAL FEE
x 50	
x 200	
+ 360	
TOTAL	

RATE	ADDITIONAL FEE
x 25	
x 100	
+ 180	
TOTAL	

RATE	ADDITIONAL FEE
x 50	
x 200	
+ 360	
TOTAL	

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